Guidance for Performing FY07 ES&H Division Self-Assessment

ISM CORE FUNCTION 1: DEFINE WORK

E1. *Revise Division ISM plan to reflect a) ES&H policy changes, and b) updates to the Institutional ISM plan. Line management communicates updates to the plan to division personnel.*
Note: By mid-July 2007, OCA will provide divisions with list of substantive PUB-3000 revisions divisions are expected to address in ISM plans (Attachment 1).

- Review our ISM Plan. Did we address all updates?
- How did we communicate changes to our ISM plan to the entire division?
- How effective was this communication?

What noteworthy accomplishments in the ISM core function *Define Work* did we achieve?

What opportunities for improvement in the ISM core function *Define Work* exist?

ISM CORE FUNCTION 2: IDENTIFY HAZARDS

E2. *Workspaces (including outside workspaces) are inspected/observed and evaluated on a regular basis.*

- Review division inspection records.
- Did we inspect workspaces per requirements set forth in our ISM Plan?
    — Did appropriate responsible individuals perform the inspections?
    — Did we prepare documentation per requirements of our ISM Plan?
    — Did we track deficiencies to resolution?

E3. *Divisions review work activities to identify, analyze, and categorize hazards and environmental impacts for the associated work. Examples of hazard inventory include: HEAR database (or equivalent), project safety review, workspace safety review, Job Hazard or Safety Analyses (JHA/JSA), environmental review (NEPA/CEQA), and chemical inventory.*

- Review division's hazard identification and inventory documentation.
- Did we review our work activities to identify, analyze, and categorize hazards consistent with Lab policy?
- Do we have a specific hazards review process described in our ISM plan? If so, did we follow this process?
- Is our inventory comprehensive (i.e. did we include all of our workspaces)?

E4. *Divisions review the environmental impact of their activities and participate in pollution prevention, energy conservation, recycling, and waste minimization programs.*

- Complete the Environmental Review Checklist (Attachment 2), or similar process.
- Did we identify opportunities for improvement?
- Did we document these?

What noteworthy accomplishments in the ISM core function *Identify Hazards* did we achieve?

What opportunities for improvement in the ISM core function *Identify Hazards* exist?

ISM CORE FUNCTION 3: CONTROL HAZARDS

E5. *Divisions ensure administrative controls are in place and maintained. Examples of administrative controls include: formal authorizations, work procedures, project safety reviews, and responsibilities for matrixed employees.*

- How do we review formally authorized work on schedule?
- How do we address changes in work scope?
- Are these processes consistent with our division ISM Plan?

E6. *Divisions ensure that ergonomic hazards (computer, laboratory, and material handling) are adequately controlled and that employees and line management are knowledgeable and engaged in this process, including the early reporting of ergonomic pain or discomfort (before an injury): Ergonomic issues/concerns/discomfort/pain are reported promptly for immediate corrective action*

- Did we implement ergonomic safety policies and procedures as described in our ISM plan?
- How do we communicate the importance of early reporting of discomfort and workload management as strategies for preventing ergonomic injuries?
- What is our EHS052 completion rate?
- What is our EHS060 completion rate?
- How timely are our ergonomic evaluations?
- Review of Ergo Advocate Program
  — Did our division participate in the Ergo Advocate Program?
  — What were the results of our participation?
- Review ergonomics database.
  — Did we complete ergonomic corrective actions?
  — How timely is implementation of corrective actions?

What noteworthy accomplishments in the ISM core function *Control Hazards* did we achieve?

What opportunities for improvement in the ISM core function *Control Hazards* exist?

7/10/2007

ISM CORE FUNCTION 4: PERFORM WORK

E7. Work is performed within the ES&H conditions and requirements specified by Lab policies and procedures.

- How do we assess SAA compliance?
- What are our formal work authorizations?
- Did we perform work within the scope of our formal authorizations and hazardous work permits? How do we assure work is performed within scope?
- Did we receive any notices of violation from external regulatory agencies? If so, did we implement corrective actions?

E8. Staff is properly trained.

- What percentage of our staff completed the JHQ in the past 12 months?
- What is our required training completion rate?

E9. Division ensures that student safety issues are effectively addressed.

- Is our policy on student safety described in our division ISM Plan?
- How do we assure students complete the JHQ and required training?
- How do we assure students are in safe work spaces and conduct their work safely?
- Did mentors complete EHS024 ES&H for Mentors and Supervisors, or EHS026 ES&H for Supervisors, Managers, & PIs (per requirements of JHQ)?

What noteworthy accomplishments in the ISM core function *Perform Work* did we achieve?

What opportunities for improvement in the ISM core function *Perform Work* exist?

ISM CORE FUNCTION 5: FEEDBACK AND IMPROVEMENT

E10. ES&H deficiencies that cannot be resolved upon discovery are entered and tracked in CATS to resolution.

- Did we document findings from workspace inspections?
- How do we assure that deficiencies identified from workspace inspections, self-assessment activities, SAARs, Occurrence Reports, Non-compliance Tracking System Reports, environmental inspections, Division Self-Assessment, EH&S technical reviews, Management of ES&H (MESH) Reviews, and external appraisals are entered in CATS in a timely manner?
- How did we address opportunities for improvement identified in FY06 self-assessment (division self-assessment, MESH, IFA)? A CATS report may suffice as a response.
- What is our CATS completion rate (regardless of schedule)?
- What is our CATS on-time completion rate (excluding entries sent to the Work Request Center)?

E11. Division employees report injuries and the division performs a thorough review of all staff injuries and accidents, including analysis of conditions that led to injury. Corrective actions to prevent recurrence are identified and effectively implemented.

- Review injury and accident reports (SAARs).
- What is our process for investigating staff injuries and accidents?
- Is this detailed in our ISM Plan?
- Did we follow this process?
- How effective were our corrective actions?

What noteworthy accomplishments in the ISM core function *Feedback and Improvement* did we achieve?

What opportunities for improvement in the ISM core function *Feedback and Improvement* exist?

Attachment 1
ES&H Policy Changes and Updates to the Institutional ISM Plan

Reference - Division ES&H self-assessment performance measure E1:

Revise Division ISM plan to reflect a) ES&H policy changes, and b) updates to the Institutional ISM plan. Line management communicates updates to the plan to division personnel.

Listed below are the substantive changes to PUB-3000 that divisions should reflect in their ISM plans by September 30, 2007. This list encompasses a) updates applicable to all divisions, and b) major revisions to, and/or new chapters on, specific technical areas applicable to some divisions. Refer to the LBNL/PUB-3000 Change Record for a complete list of revisions for additional updates with division-specific applicability.

The Institutional ISM Plan is currently under revision; therefore, no updates to division ISM plans to reflect the institutional plan are required in FY07.

Chapter and Title	Changes	Effective Date
1 - General Policy and Responsibilities	A section was needed in the Chapter to document the requirement for conducting Safety walkarounds. A section was also needed in the Chapter to describe employee involvement and worker ES&H rights required by 10 CFR 851. Edited the Chapter to clarify terminology.	01/10/07
1.3.2 – Clear Roles and Responsibilities for ES&H	Replaced section describing Division ES&H Coordinator's responsibilities with section describing Division Safety Coordinator's responsibilities.	10/27/06
1.3.2.5 — Managers, Supervisors, and Work Leads	Changed frequency of safety walkarounds from quarterly to periodic.	01/24/07
32 – Job Hazards Analysis	New Chapter created to describe formal process of job hazard analysis; new chapter was created due to 851 requirements.	03/02/07
5.1 – Incident Reviewing and Reporting	Section title changed from "Accident Investigation and Reporting" to "Incident Reviewing and Reporting." Entire section revised.	09/19/06
6 – Safe Work Authorizations	Chapter revised to clarify who authorizes formal work authorizations, who is responsible for work reauthorizations, and where reauthorizations records are archived.	11/18/06
6, Appendix D – Activity Hazard Document (AHD) Process	Appendix revised to clarify policies regarding LBNL's management of AHDs, and the process for initial authorization and reauthorization of AHDs.	11/18/06

18 – Major chapter revision	Major chapter revision.	12/07/06
24 – Environment, Health, and Safety Training	Major revision to chapter; appendices expanded.	12/11/06
25 – Shop Safety and Power Tools	New chapter.	12/11/06

Attachment 2
Environmental Review and Self-Assessment Checklist

Lab staff should be aware of the environmental impacts of their activities and seek ways to reduce those impacts. The checklist is designed to: 1) assist Divisions in reducing, their environmental impacts as required in Pub-3000 and the Institutional ISM Plan, and 2) provide guidance to Divisions in self-assessing their performance.

Listed below are suggested examples of activities that can accomplish this purpose. This is not meant to be an exhaustive list and is meant to provide basic activities and possibly stimulate other ideas for reducing the environmental impacts.

Answer "yes" or "no" to the following questions. By asking your Departments, Groups or teams these questions, areas for improvement may be identified. If activities cannot be implemented, describe any impediments.

Paper reduction

Yes   No

☐   ☐   Are your Divisions' copy machines default settings to make double-sided copies?

☐   ☐   Are all documents printed and copied on both sides?

☐   ☐   Are documents routinely stored and sent in electronic formats, rather than making hard copies?

☐   ☐   Is paper that is clean on one side used routinely for in-house drafts and message pads?

☐   ☐   Have cover sheets for faxes been eliminated?

Lessons Learned: Are there additional areas where you have reduced of eliminated the use of paper? If yes, please describe:

_____

_____

_____

General

Yes   No

☐   ☐   Are all presentations using electronic formats rather than transparencies?

☐   ☐   Are all items such as paper, aluminum cans, cardboard, plastic bottles, transparencies, floppy disks and packing peanuts recycled?

☐   ☐   Are all batteries rechargeable and all calculators solar?

☐   ☐   Is your Division using 100% recycled content copier paper?

☐   ☐   Are remanufactured items such as recharged toner cartridges routinely used?

Lessons Learned: Are there other activities that you have implemented? If yes, please describe:

_____

_____

_____

Laboratory Areas

Yes   No

☐   ☐   Has your Division minimized the purchase and use of hazardous materials to the extent feasible? (Waste Management can assist)

☐   ☐   Do all oil cans, plant cans and other liquid materials have appropriate drip pans or trays to catch leaks?

☐   ☐   Has all mercury-containing equipment been replaced with non-mercury alternatives where ever possible?

☐   ☐   Has your Division developed and implemented a process whereby all existing and planned research experiments using hazardous chemicals or radioactivity reviewed for use of alternative non hazardous materials?

☐   ☐   Has your Division replaced photochemicals with digital imaging where feasible?

Lessons Learned: Has your Division implemented other activities that have reduced or eliminated the use of hazardous materials? If so, please describe:

_____

_____

_____

Purchases

Yes   No

☐   ☐   Has your Division purchased equipment and was it Energy Star rated? If so, are the Energy Star features enabled?

☐   ☐   Are routine supplies made with recycled materials (i.e., paper products, toner cartridges, office products)?

☐   ☐   Are office supplies such as trays, binders, etc. obtained from the Property Reuse Center?

☐   ☐   Are potential return-on-investment opportunities identified (such as equipment purchases) and submitted to the Lab for funding? (WM can assist)

Lessons Learned: Has your Division implemented other activities that have reduced energy consumption, or minimized the use of virgin materials? If yes, please describe:

_____

_____

_____

_____   _____
Signature   Date